## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

| Application or Docket Number |  |  |  |  |  |  |  |  |  |
|------------------------------|--|--|--|--|--|--|--|--|--|
| 3401-125                     |  |  |  |  |  |  |  |  |  |
| 10002523                     |  |  |  |  |  |  |  |  |  |

| CLAIMS AS FILED - PART I<br>(Column 1)  |  |  |              |                     |                                | nn 2)            | 9        | SMALL ENTITY TYPE   |                        | OR | OTHER THAN          |                        |
|---|--|--|--------------|---------------------|--------------------------------|------------------|----------|---------------------|------------------------|----|---------------------|------------------------|
| TO  | TAL CLAIMS                                     | -  | 7            |                     |                                |                  |          | RATE                | FEE                    |    | RATE                | FEE                    |
| FOF   | ₹  |  | NUMBER FILED |                     | NUMBER EXTRA                   |                  |          | BASIC FEE           | 370.00                 | OR | BASIC FEE           | 740.00                 |
| TOTAL CHARGEABLE CLAIMS 7 mi  |  |  |              | us 20=              | • —                            |                  |          | X\$ 9=              |                        | OR | X\$18=              |                        |
| INDEPENDENT CLAIMS min  |  |  |              |                     |                                |                  |          | X42=                |                        | OR | X84=                |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT  |  |  |              |                     |                                |                  |          | +140=               |                        | OR | +280=               |                        |
| * If the difference in column 1 is less than zero, enter  |  |  |              |                     |                                | olumn 2          |          | TOTAL               |                        | OR | TOTAL               | 740                    |
| CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3  |  |  |              |                     |                                |                  | <u>)</u> | SMALL E             | NTITY                  | OR | OTHER<br>SMALL      |                        |
| A TM  | 1 11 1   | CLAIMS REMAINING AFTER AMENDMENT             |              | PREVI               | BER                            | PRESENT<br>EXTRA |          | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                | ADDI-<br>TIONAL<br>FEE |
| AMENDMENT A   | Total  | . /  | Minus        | **                  | 10                             | =                |          | X\$ 9=              |                        | OR | X\$18=              |                        |
|   | Independent                                    | • /  | Minus        | ***                 | 3                              | =                | 4        | X42=                |                        | OR | X84=                |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |              |                     |                                |                  |          | +140=.              |                        | OR | +280=               |                        |
|   |  |  |              |                     |                                |                  |          | TOTAL<br>ADDIT. FEE |                        | OR | TOTAL<br>ADDIT. FEE |                        |
| (Column 1) (Column 2) (Column 3)  |  |  |              |                     |                                |                  |          |                     |                        |    | •                   |                        |
| AMENDMENT B   |  | CLAIMS REMAINING AFTER AMENDMENT             |              | NUM<br>PREVI        | HEST<br>IBER<br>OUSLY<br>FOR   | PRESENT<br>EXTRA |          | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total  | <b>.</b>                                     | Minus        | ##                  |                                | =                |          | X\$ 9=              |                        | OR | X\$18=              | -                      |
| MER   | Independent                                    | •  | Minus        | 294                 |                                | =                |          | X42=                |                        | OR | X84=                |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT       |  |              |                     | TCLAIM                         |                  | ال       | +140=               |                        | OR | +280=               |                        |
|   |  |  |              |                     |                                |                  |          | TOTAL<br>ADDIT. FEE |                        | OR | TOTAL               |                        |
|   |  |  |              |                     |                                |                  |          |                     | <u></u>                | ,  | ADDII. FEE          |                        |
| AMENDMENT C   |  | (Column 1)  CLAIMS REMAINING AFTER AMENDMENT |              | HIGI<br>NUA<br>PREV | HEST<br>MBER<br>HOUSLY<br>OFOR | PRESENT<br>EXTRA |          | RATE                | ADDI-<br>TIONAL<br>FEE |    | RATE                | ADDI-<br>TIONAL<br>FEE |
|   | Total  | *  | Minus        | **                  |                                | =                | ┛        | X\$ 9=              | ·                      | OR | X\$18=              |                        |
| RE  | Independent                                    | *  | Minus        | ***                 |                                | z.               | _        | X42=                |                        | OR | X84=                |                        |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |  |              |                     |                                |                  |          |                     |                        |    | 000                 |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.   |  |  |              |                     |                                |                  |          | +140=               |                        | OR | +280=               |                        |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  *** ADDIT. FEE                       |  |  |              |                     |                                |                  |          |                     |                        |    |                     |                        |
| The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |  |              |                     |                                |                  |          |                     |                        |    |                     | F 001115005            |